

gender (52.6%) were interviewed. Treatment given was cisplatin based chemotherapy in 42% of patients. Multivariate analysis confirmed that specific training strongly correlated with information status on clinical and appointment related procedures in the oncology department, chemotherapy toxicities, take home on premedication drugs, and nutrition, both as assessed by the patients (all p values <0.001) and by the interviewer (all p values <0.001).

Conclusion: Specific training as provided within a cancer education nursing unit strongly affects the information status of cancer patients on various domains of information needs. The cancer education nursing unit should be a part of medical oncology department.

4243

POSTER

Descriptive analysis of adverse drug events registered in a computerised information system

C. Oroviogicochea¹, E. Orecilla², C. Rocamador², J. Ros². ¹Clinica Universidad de Navarra, Nursing Innovation and Research Unit, Pamplona (Navarra), Spain; ²Clinica Universidad de Navarra, Oncology Department, Pamplona (Navarra), Spain

Background: Adverse drug reactions (ADRs) are a significant source of morbidity and mortality among cancer patients. An ADR is harm that results despite having used the drug appropriately. Without details and documentation, it could be difficult to properly diagnose the event and monitor recurrences. Therefore, it is critical to improve patients' safety that oncologists and nurses take extra care to record in patient's medical charts any adverse events likely to have been caused by a drug. Our center has a computerized physician order entry and in 2004 it was developed an application to facilitate professionals reporting of ADRs. In 2006 it was modified to facilitate reporting and to allow access to nurses. The aim of this study is to assess the incidence, principal symptoms and treatment of adverse drug reactions (ADRs) of oncology patients admitted in the cancer outpatient unit.

Method: Retrospective descriptive study has been performed to analyse the adverse drug reactions registered in the computerized system from September 2006 to December 2008 in our cancer outpatient unit. Cluster analysis was performed to identify the symptoms pattern of clinical presentation.

Results: 132 ADRs were assessed from an amount of 20,500 chemotherapy sessions in our cancer outpatient unit (0.64%) and 39 have been communicated to the National Pharmacovigilance Organization. The 132 ADRs represented the 77% of the total ADRs reported in the hospital. The chemotherapy drugs most involved in the ADRs were Taxol, Taxotere, Oxaliplatin, Cetuximab, and Irinotecan. 63% were in combination with other cytostatics. Most of the ADRs were between the first and third doses although there are 18 ADRs (13%) that occurred after the sixth dose. The most frequent symptoms were rash (56%), dyspnea (36%), itching (25%) and changes in blood pressure (23%).

Conclusions: The incidence of ADRs in oncology patients is high although lower than what has been reported in previous articles. Registration makes possible to quantify and measure them in order to prevent and treat them more efficiently. The new reporting system and implication of nurses has improved the number and data quality of the ADRs documentation. New protocols have been developed to improve patients' safety during cytostatic administration.

4244

POSTER

A specific 3% urea hydrating lotion reduces radiation-induced dermatitis compared with hydration alone

M. Perez¹, M.A. Cabeza¹, M.T. Murillo¹, A. Fernández¹, J. Alcoba¹, N. Drove¹, A. Mirada², M. Martín², M. Vidal², E. Lanzas¹. ¹Hospital 12 Octubre, Radiation Oncology, Madrid, Spain; ²Isdin, Departamento Médico Barcelona, Madrid, Spain

Background: To evaluate the efficacy of a specific 3% urea lotion compared with hydration alone in the prevention and reduction of acute skin toxicity following external radiotherapy.

Materials and Methods: Double-blind randomized, controlled study of the efficacy of a specific hydrating lotion containing 3% urea, polidocanol and hyaluronic acid (active group) versus a hydrating lotion without active agents (placebo group) to reduce the incidence and intensity of radiation-induced dermatitis (RID). Thirty patients with rectal cancer and 69 with breast cancer were included. All patients were followed up weekly until two weeks after its ERT completion. Skin toxicity was evaluated weekly using the RTOG/EORTC acute toxicity scale. To assess factors related to its development, a multivariate study with binary logistic regression model was used, including sex, age, diagnosis, skin phototype, total ERT dose and chemotherapy use as factors. RID severity was calculated using the

highest skin toxicity score and "toxicity during follow-up" obtained from the mean degree of toxicity during the study.

Results: Fifty-one patients were included in the active group (51.5%) and 48 in the placebo group (48.5%). The characteristics of ERT (total dose, fraction size, type of radiation) were similar in both groups with no significant differences. The incidence of RID was 91.3% in breast cancer and 63.3% in rectal cancer. The comparison between groups showed a lower incidence of skin toxicity in the active group (74.5% vs. 91.7%; group $p < 0.05$; OR: 3.76 [95% CI: 1.13–12.5]) and the multivariate analysis confirmed that the probability of developing RID during ERT was lower with the active hydrating lotion (OR: 8.4 $p < 0.05$). The incidence of toxicity grade ≥ 2 was 27.5% in active group and 34.5% in placebo group. Although this difference did not reach statistical significance, analysis on the evolution of toxicity during follow-up as a whole showed a significantly lower toxicity in the active group. Skin toxicity had repercussion (interruption of ERT or/and need of other dermatitis therapy) were more frequent in the placebo group (14.6% vs. 2.0%; $p < 0.05$, OR: 8.5).

Conclusion: The results suggest that the specific 3% urea hydrating lotion used lowered the risk of developing RID between three and eight times compared with hydration alone and reduced its intensity, as a result of the active substances in its composition.

4245

POSTER

Influence of social representations about cancer on nursing care

A. Espadilha¹, I. Rebelo¹, M. Carrageta², M. Coelho², C. Pinto³. ¹Escola Superior de Enfermagem de Lisboa, Medical Surgical/Adult and Elderly, Lisboa, Portugal; ²Escola Superior de Enfermagem de Coimbra, Medical Surgical/Adult and Elderly, Coimbra, Portugal; ³Escola Superior de Enfermagem do Porto, Paediatrics, Porto, Portugal

The diagnosis of cancer is still associated with an emotionally negative impact, representing a terrible threat, for the patient as well as for family members and the population in general. Nurses who care for oncology patients carry their own social representations and are influenced by their own values, beliefs and myths. Their attitudes may influence the way the patient perceives and lives this experience. Results of research studies suggest that negative attitudes from the nurses towards cancer can be due to the prolonged contact with patients with recurrent disease or who are dying, than with long term survivors. This reality leads to feelings of impotence in treating cancer. The authors agree that educational processes and pedagogical strategies can contribute to change the values, myths and beliefs of the students with influence in the quality of care delivered. This highlights the importance that nursing students of different levels receive theoretical and technical education in this field. They have to become skilled in the recognition of factors contributing to less positive attitudes in their practice, in their relation with patients and families, health team and other persons in their life context.

The aim of this study is: Contribute to the knowledge about nurses' cancer representations to improve the adequacy of education which shall lead to enhance quality of care delivered to cancer patients and their families.

Goals:

- Identify the nurses representations about cancer, who just completed the Post Graduation Course in Oncology Nursing and are working in medical and surgical settings;
- Identify the students representations about cancer, who just graduated in Nursing in the public Nursing School of Lisbon;
- Compare the results obtained in both samples with different education.

Methodology: A questionnaire will be delivered to a non probabilistic sample of 20 nurses and 20 students. A free association of words is proposed. With this technique we intend to access the representations with the construction of semantic fields. The analyses of the free association of words results in a positive or negative significance of the social representation of cancer.

Data processing and analysis: The results, discussions and conclusions will be presented at the Conference, as at this time, the study is in course and it was yet not possible to treat the data.

4246

POSTER

Fast-track surgery for women with breast cancer

B. Mertz¹, H. Williams¹. ¹Rigshospitalet, Breast Surgery, Copenhagen, Denmark

The Breast Cancer Clinic at Rigshospitalet has implemented a new clinical pathway for patients undergoing breast cancer surgery. The pathway consists of an ultra short hospital stay as well as planned visits to a nurse-led outpatient department and telephone consultations. Key elements are a well-organized care process.

The average length of stay as an inpatient for all breast cancer patients has been reduced from 3.6 days to 1.4 days. Early discharge is possible when careful attention is paid to perioperative care and patient information as well as surgical and anaesthetic care according to modern standards avoiding postoperative pain and nausea. Furthermore wound and drain management must follow clinical guidelines.

Flow charts have been made so that almost every patient being admitted to the clinic follows the same course of treatment, from the first visit to the outpatient department, through being admitted to the ward, to being discharged again from the outpatient department.

The nursing model is primary nursing. Nursing interventions are described in a critical pathway. The nurses are specially trained and have good communication skills.

Each patient is allocated a named contact nurse on the very first visit to the outpatient department. The contact nurse follows the patient all the way through, both as an in and outpatient, and retains overall responsibility for the patient's care during her stay on the ward. The aim is that the patient sees her allocated nurse no less than 75% of the times she is in contact with the department, either as an in or outpatient.

Before being discharged the patients are assessed according to fixed discharge criteria such as psychological wellbeing, physical performance, sufficient knowledge about wound and pain management. Prior to discharge the nurse also makes sure that there is a next of kin present at home and that the patient knows how to contact the nurses at the clinic. A written questionnaire was developed consisting of 15 multiple choice and open questions and patients were interviewed before and after implementation of the new pathway. The overall assessment of the new procedure was good as shown by high patient satisfaction. The interviews also showed that patients had sufficient knowledge to cope with early discharge.

Early discharge after breast cancer surgery is feasible, safe and popular with patients without compromising the quality of care.

4247

POSTER

Designing and implementing a generic oral chemotherapy diary into clinical practice

J. Johnson¹, C. Oakley². ¹St Georges NHS Trust, Neuro-oncology, London, United Kingdom; ²Guy's and St Thomas' NHS Foundation Trust, Oncology, London, United Kingdom

Background: The increasing use of oral anti cancer therapies has resulted in International concern regarding patient safety. These factors, and results from an initial study prompted the development of a generic oral chemotherapy patient diary. A second study then evaluated the integration of the diary into practice. The diary has subsequently been awarded the 2008 European Oncology Nursing Society, 'Excellence in Patient Education' prize.

Materials and Methods: Results of the initial ethnographic study suggests cancer patients and carers are poorly prepared to manage oral therapies, both in terms of self-medication and early reporting of treatment-related symptoms. It further appears that patients find oral chemotherapy diaries a helpful tool to promote self-care. The generic diary was developed in partnership with key local stakeholders including patients. Existing diaries were reviewed and core components agreed. The second, mixed methods feasibility study, examined the process of integrating the diary into clinical practice. This study, observed the impact of the diary on adherence, self efficacy and symptom identification and reporting. Both studies included patients with either colorectal or haematological malignancies.

Results: The diary appears to provide a simple, generic tool to assist patients and their carers to manage their oral chemotherapy treatments. The diary was used as a prompt and to formally record when doses have been taken. The symptom traffic light system, which alerts patients when to call the hospital for symptom advice, was particularly well evaluated for its pictorial format.

Conclusions: The diary has been implemented across two cancer networks and begins to address some of the key issues, concerns and educational gaps surrounding the care of patients undergoing oral chemotherapy. As it is generic, it represents significant potential benefit to a large cohort of patients in the future. However, the diary is not considered the sole solution to minimise risk, but as part of a comprehensive care package.

4248

POSTER

Quality of life for children and family in isolation

A. Graça¹, R. Pires¹. ¹Instituto Portugues de Oncologia, Unidade de Transplantação Medular, Lisboa, Portugal

The nursing care of a child and family can be a real and difficult challenge, especially when physical and emotional suffering is involved.

When the nursing care involves the quality of life parameter, all the process gets another dimension and requires cooperation between all elements of the multi-disciplinary team.

According to Wallender, quoted in Oliveira (2007), quality of life in children and adolescents can be defined as the combination of subjective and objective aspects that promote the sense of well-beingness, concerning several domains of life, considered important in their own culture and historical time, according to the universal human rights patterns.

The children who are submitted to bone marrow transplant recipient treatment have to go through difficult, painful and excessively aggressive moments at a time when playing should be their only concern. It is possible to provide happy moments like birthday parties, family dinners and visits of celebrities when all elements of the team cooperate. This project of providing unique moments to children/parents is a daily practice in the UTM.

It is possible and encouraging to promote moments full of quality of life inside the bone-marrow transplant unit, even if the professionals must hide behind masks and gloves.

Sharing this project about promotion of quality of life and unique moments to the children and parents is a challenging goal to our unit.

Objectives: It is our purpose to:

- Reflect about nursing care of children and family, as far as quality of life is concerned, at the bone-marrow transplant unit.
- Share moments and strategies that brought and/or improved quality of life to children/parents in the UTM.

Methodology: The methodological strategies will be based on description; a discussion will also be organised so that professionals involved can share experience and knowledge.

Conclusion: Promoting moments of quality in the life of children and families in isolation at UTM allows us to individualise caring, minimise complications and directs to a successful coping. It also brings a smile to the most difficult days of their lives.

4249

POSTER

Information needs of newly diagnosed breast cancer patients

Y. Hanhauser¹. ¹St James's Hospital, Breast Care Department, Dublin, Ireland

The aim of this study was to establish the information needs of patients newly diagnosed with breast cancer within the Midlands area of Ireland. A descriptive survey was employed. 73 structured self-report questionnaires were distributed to women who met the study's inclusion criteria. A response rate of 95% was achieved. Women (n = 69) with breast cancer who were between six months and four years post diagnosis returned the questionnaires voluntarily.

The study findings provide further corroboration for established evidence promoting the importance of women with breast cancer being well-informed and supported at the time of their diagnosis. The study respondents demonstrated a very high level of information needs; a finding congruent with other international studies carried in this area. Other main findings included the need for information regarding recurrence of disease; how to tell if the disease had come back and treatment related informational support. Moreover, no statistical difference between younger and older women regarding their informational needs was identified. Finally, respondents identified nurses as one of their main sources of information, confirming the important role that specialist nurses can play in the provision of adequate and timely information at time of diagnosis with breast cancer. This research highlighted that patient's have high expectations and demands for the amount, timing and quality of the information that they receive. As a result this provides the specialist breast care nurse with the unique opportunity to ensure that the information given can be tailored to meet the needs and preferences of the individual women.

4250

POSTER

A pathway to continence

A. Espadinha¹, M. Van Zeller², I. Rebelo³. ¹Escola Superior de Enfermagem de Lisboa, Medical Surgical/Adult and Elderly, Lisboa, Portugal; ²Hospital Reynaldo dos Santos, Stomatherapy, Lisboa, Portugal; ³Escola Superior de Enfermagem de Lisboa, Medical Surgical/Adult and Elderly, Lisboa, Portugal

The person with colostomy faces several problems related to fecal incontinence and the need to use a stoma pouch. The irrigation technique contributes to solve a significant part of those problems. Being aware of this fact, we developed an investigational study.

The goal is to analyze factors influencing the colostomate to adhere or not to the irrigation technique.

It is an exploratory descriptive study with quantitative approach. A convenience sample of 80 volunteer participants with descendent or